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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Brin- iden	e the name that is on a government-issued ure identification (for mple, your driver's use or passport). If your picture tification to your sting with the trustee.	Toussaint First name Jerrod Middle name Rowland Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-9646	

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		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
1. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		269 Highway 138 Apt 2907 Riverdale, GA 30274				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Clayton				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
5.	Why you are choosing	Check one:	Check one:			
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known)

Par	Tell the Court About	our E	Bankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankrupto e box.	У
	choosing to file under	■ C	Chapter 7				
			Chapter 11				
			Chapter 12				
			Chapter 13				
8.	How you will pay the fee		about how yo	ou may pay. Typi attorney is subm	cally, if you are paying the fee yo	with the clerk's office in your local court for more defurself, you may pay with cash, cashier's check, or molf, your attorney may pay with a credit card or check	ney
						n, sign and attach the Application for Individuals to P	ay
			ŭ		(Official Form 103A).	only if you are filing for Chapter 7. By law, a judge m	·0\/
		Ц	but is not req	uired to, waive y	our fee, and may do so only if you	ur income is less than 150% of the official poverty line	that
						installments). If you choose this option, you must fill ial Form 103B) and file it with your petition.	out
					, , , , , , , , , , , , , , , , , , ,	,	
9. Have you filed for bankruptcy within the							
	last 8 years?	□ Ye			\M/h a n	Coop number	
			District District		When When	Case number Case number	
			District		When	Case number Case number	
			District		vviieii	Case Humber	
10.	Are any bankruptcy cases pending or being	■ N	0				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an	□ Ye	es.				
	affiliate?						
			Debtor		NA/Is a se	Relationship to you	
			District		When	Case number, if known	
			Debtor		Whon	Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	□ N	o. Go to I	ine 12.			
	residence?	■ Ye	es Has yo	our landlord obtai	ned an eviction judgment against	you?	
		- IV	■	No. Go to line 1	2.		
				Yes. Fill out Init		ludgment Against You (Form 101A) and file it with this	3

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Case number (if known)

Par	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	☐ Yes. Name and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code			
	it to this petition.		Check	the appropriate bo	x to describe your business:			
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	e			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appro- deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statem e operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the pro- in 11 U.S.C. 1116(1)(B).						
	For a definition of small	■ No.	I am n	ot filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	he hazard?				
	public health or safety? Or do you own any property that needs		If immed	iate attention is				
	immediate attention?		needed,	why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?				
					Number, Street, City, State & Zip Code			

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Debtor 1 Toussaint Jerrod Rowland

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Toussaint Jerrod Rowland Case number (if known)

Part	6: Answer These Questi	ons for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.		usiness debts? Business debts are deestment or through the operation of the l				
			□ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you o	owe that are not consumer debts or busi	ness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exempt p railable to distribute to unsecured credite	property is excluded and administrative expenses ors?			
	administrative expenses are paid that funds will		No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	□ 50-99		<u> </u>	<u></u> 50,001-100,000			
		☐ 100-1 ☐ 200-9		□ 10,001-25,000	☐ More than100,000			
19.	How much do you estimate your assets to	\$ \$0 - \$50,000		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
Part	7: Sign Below							
For	you	I have ex	amined this petition, and I dec	clare under penalty of perjury that the in	formation provided is true and correct.			
			•	, I am aware that I may proceed, if eligil elief available under each chapter, and	ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.			
				not pay or agree to pay someone who is e notice required by 11 U.S.C. § 342(b)				
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.								
			cy case can result in fines up t		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Toussa	ssaint Jerrod Rowland int Jerrod Rowland e of Debtor 1	Signature of De	btor 2			
		Executed	d on July 12, 2019	Executed on				
MM / DD / YYYY MM / DD / YYYYY								

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Debtor 1 Toussaint Jerrod Rowland

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Case number (if known)

/s/ Taylor	Foster GA Bar No.	Date	July 12, 2019	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Taylor Fos	ster GA Bar No. 888197			
Printed name				
Clark & W	ashington, L.L.C.			
	heast Expressway			
Building 3				
Atlanta, G	A 30341			
Number, Street,	City, State & ZIP Code			
Contact phone	770-488-9338	Email address	cworders@cw13.com	
GA				
Bar number & S	tate			

Fill	in this	s information to ide	entify your case:						
Del	btor 1	Toussa	int Jerrod Rowla	nd					
		First Name	N	liddle Name	l	ast Name	_		
	btor 2 buse if, fil	ing) First Name	N	liddle Name	ı	ast Name			
Lini	itad Sta	otos Bankruntov Coi	urt for the: NORT	HEDNI DISTRICT (OF GEO	RGIA - ATLANTA DI	/ISION		
Uni	ileu Sia	ates Bankruptcy Co	in for the: NOR I	HERN DISTRICT	JF GEO	KGIA - ATLANTA DI	/ISION		
	se num nown)	nber						_	neck if this is an mended filing
		al Form 107 nent of Fina	ncial Affair	s for Indivi	duals	Filing for B	ankruptcy		4/19
info nun	rmatio	n. If more space i f known). Answer e	s needed, attach a	separate sheet to	this for	together, both are n. On the top of any			
1.		is your current ma							
	п,	Married							
	_	Not married							
2.	Durin	on the last 3 years	have you lived any	where other than	where v	ou live now?			
۷.	_		nave you nveu any	where other than	wilele y	ou live now :			
	_	No Yes. List all of the pl	aces you lived in the	e last 3 years. Do n	ot includ	e where you live now			
	Debt	tor 1 Prior Address	:	Dates Debtor 1 lived there		Debtor 2 Prior Ad	dress:		Dates Debtor 2 lived there
		Consepts 21 Dr onia, GA 30058		From-To: 06/2017 - 06/2	018	☐ Same as Debtor 1			☐ Same as Debtor 1 From-To:
		1 Washington Ro nta, GA 30344	I	From-To: 2013 - 06/201 7	7	☐ Same as Debtor 1			Same as Debtor 1
3. state	es and	territories include A		laho, Louisiana, Ne	vada, Ne	ew Mexico, Puerto Ri			? (Community property isconsin.)
Pai	rt 2	Explain the Source	es of Your Income						
4.	Fill in	the total amount of	income you receive	d from all jobs and	all busine	iness during this ye esses, including part- er, list it only once un	time activities.	vious calen	dar years?
		No							
	_	Yes. Fill in the detail	s.						
			Debtor	1			Dobtor 2		
				of income	Gros	s income	Debtor 2 Sources of inc	ome	Gross income
				Il that apply.	(befo	re deductions and sions)	Check all that a		(before deductions and exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
	om January date you f		nt year until nkruptcy:	■ Wages, commissions, bonuses, tips	\$17,000.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business		☐ Operating a b	ousiness	
	r last calen nuary 1 to		31, 2018)	■ Wages, commissions, bonuses, tips	\$30,000.00	☐ Wages, components	missions,	
				☐ Operating a business		☐ Operating a b	ousiness	
	r the calend nuary 1 to			■ Wages, commissions, bonuses, tips	\$30,000.00	☐ Wages, components with the second wages, tips	missions,	
				☐ Operating a business		☐ Operating a b	ousiness	
	List each s	•	the gross inco	se and you have income that yome from each source separat	Q	•		
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
	r last calen nuary 1 to		31, 2018)	Personal Injury Settlement	\$3,000.00			
Par	rt 3: List	: Certain Pa	nyments You	Made Before You Filed for I	Bankruptcy			
6.	Are either	Debtor 1's	or Debtor 2 ebtor 1 nor I	's debts primarily consumer Debtor 2 has primarily consu personal, family, or househol	debts? mer debts. Consumer debt	s are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		_	90 days befo	ore you filed for bankruptcy, di	d you pay any creditor a tota	l of \$6,825* or mor	e?	
		□ _{No.}	Go to line 7					
		Yes	paid that cr not include	each creditor to whom you paineditor. Do not include payment payments to an attorney for the ton 4/01/22 and every 3 years	its for domestic support oblig his bankruptcy case.	ations, such as chi	ild support a	nd alimony. Also, do
	_	•	•	, ,		or arter the date of	aujustinent	•
	■ Yes.			or both have primarily consure you filed for bankruptcy, die		I of \$600 or more?		
		□ No.	Go to line 7	, .				
		■ Yes	include pay	each creditor to whom you paid ments for domestic support of this bankruptcy case.				
	Creditor'	s Name an	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for

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Debtor 1 Toussaint Jerrod Rowland

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	First Investors Financial Services Attn: Bankruptcy 380 Interstate North Parkway, Suite 300 Atlanta, GA 30399	04/2019 05/2019 06/2019	\$885.00	\$10,175.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other_	ard payment
	Familyfirstcu Fka Ftcu 3604 Atlanta Ave Hapeville, GA 30354	04/2019 05/2019 06/2019	\$786.00	\$6,799.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other	ard payment
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any ge control, or owner of 20%	neral partners; partne or more of their voting	erships of which y g securities; and a	ou are a genera any managing a	al partner; corporations gent, including one for
	Yes. List all payments to an insider. Insider's Name and Address	Total amount	Amount you	Reason for this payment		
		Dates of payment	paid	still owe		
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider Insider's Name and Address		Total amount	Amount you	Reason for	this payment
			paid	still owe	Include cred	itor's name
Par 9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	cy, were you a party in a cases, small claims action	ns, divorces, collectio		actions, suppor	t or custody
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	oreclosed, garni	ished, attached	I, seized, or levied?
	Creditor Name and Address	Describe the Property		Date)	Value of the
		Explain what happene	d			property

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11.	Within 90 days before you filed for bankr accounts or refuse to make a payment be No Yes. Fill in the details.		did any creditor, including a bank or financial in e you owed a debt?	stitution, set off any a	mounts from your					
	Creditor Name and Address	De	escribe the action the creditor took	Date action was taken	Amount					
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, or		vas any of your property in the possession of an er official?	assignee for the bene	fit of creditors, a					
	☐ Yes									
Par	t 5: List Certain Gifts and Contribution	s								
13.	Within 2 years before you filed for bankro ■ No □ Yes. Fill in the details for each gift.	uptcy,	did you give any gifts with a total value of more	than \$600 per person?	•					
	Gifts with a total value of more than \$60 per person	0	Describe the gifts	Dates you gave the gifts	Value					
	Person to Whom You Gave the Gift and Address:									
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution.									
	☐ Yes. Fill in the details for each gift or c Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed	Dates you contributed	Value					
Par	t 6: List Certain Losses									
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,					
	■ No □ Yes. Fill in the details.									
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost					
Par	List Certain Payments or Transfers	S			_					
16.	consulted about seeking bankruptcy or	repari	id you or anyone else acting on your behalf pay ing a bankruptcy petition? rs, or credit counseling agencies for services require		ty to anyone you					
	□ No									
	Yes. Fill in the details.									
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment					
	CIN Legal Data Services Box 88229 Milwaukee, WI 53288 Clark and Washington		Various Legal Services	06/2019	\$70.00					

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17.	Within 1 year before you filed for bankrupton promised to help you deal with your credite Do not include any payment or transfer that your long.	ors or to make payments		ehalf pay or transfer any prope	rty to anyone who
	Yes. Fill in the details.				
	Person Who Was Paid Address	Description and values	alue of any propert	y Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your be include both outright transfers and transfers minclude gifts and transfers that you have alread No Yes. Fill in the details.	ousiness or financial affa ade as security (such as t	airs? the granting of a secu		
	Person Who Received Transfer Address	Description and v property transfer	red	Describe any property or payments received or debts paid in exchange	Date transfer was made
	Person's relationship to you				
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pr ■ No □ Yes. Fill in the details.		y property to a self-	settled trust or similar device	of which you are a
	Name of trust	Description and v	alue of the property	transferred	Date Transfer was made
Par	8: List of Certain Financial Accounts, In	struments, Safe Deposit	t Boxes, and Storag	e Units	
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso No	or other financial accou	nts; certificates of d		,
		Lant Authorita of	T		1 (1: - 1 - :
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account of instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details.	year before you filed for	bankruptcy, any sa	ife deposit box or other depos	itory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		cribe the contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than your	home within 1 year	before you filed for bankrupt	cy?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or it to it? Address (Number, S State and ZIP Code)		cribe the contents	Do you still have it?

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Par	19: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that someofor someone.	one else owns? Include any prope	rty you borrowed from, are storing fo	r, or hold in trust
	■ No			
	Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	t 10: Give Details About Environmental Information	ation		
For	the purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul	ir, land, soil, surface water, groun		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	sites.	, , ,	
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that ye	ou know about, regardless of whe	n they occurred.	
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	strative proceeding under any env	ironmental law? Include settlements	and orders.
	■ No			
	Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	111: Give Details About Your Business or Con	nections to Any Business		
	Within 4 years before you filed for bankruptcy,	-	ny of the following connections to an	v business?
	☐ A sole proprietor or self-employed in a t	•	,	,
	☐ A member of a limited liability company		•	
	☐ A partner in a partnership	, and the second	F X = 7	
	☐ An officer, director, or managing execut	tive of a corporation		
	☐ An owner of at least 5% of the voting or	-		

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Debtor 1 Toussaint Jerrod Rowland

	■ No. None of the above applies. Go to P	Part 12.	
	☐ Yes. Check all that apply above and fill	in the details below for each business.	
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed
28.	Within 2 years before you filed for bankrupte institutions, creditors, or other parties.	cy, did you give a financial statement to ar	nyone about your business? Include all financial
	■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	t 12: Sign Below		
are with		false statement, concealing property, or ol	declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
То	ussaint Jerrod Rowland nature of Debtor 1	Signature of Debtor 2	
Dat	e _July 12, 2019	Date	
_	you attach additional pages to Your Stateme	nt of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?
□ Y	es		
Did	you pay or agree to pay someone who is not	an attorney to help you fill out bankruptcy	y forms?
	lo		

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information to identi	fy your case and	d this filing:			
Debtor 1 Toussaint	Jerrod Rowlar	nd			
First Name	Mi	iddle Name	Last Name		
Debtor 2 Spouse, if filing) First Name	Mi	iddle Name	Last Name		
Jnited States Bankruptcy Court for	or that NODTH	EDNI DISTRICT OF C	EODGIA ATLANTA DIVIS	ION	
onlied States Bankruptcy Court is	or the: NORTH	EKN DISTRICT OF G	EORGIA - ATLANTA DIVIS		
Case number					☐ Check if this is an
					amended filing
Official Form 106A/	<u>B</u>				
Schedule A/B: F	Property				12/15
each category, separately list and		ist an asset only once.	If an asset fits in more than o	ne category, list the asset in	the category where you
Part 1: Describe Each Residence,	Building, Land, or	Other Real Estate You	Own or Have an Interest In		
Do you own or have any legal or	equitable interest	in any residence, buildi	ng, land, or similar property?		
■ No. Go to Part 2.					
☐ Yes. Where is the property?					
Part 2: Describe Your Vehicles					
Cars, vans, trucks, tractors, s □ No ■ Yes	sport utility veni	cies, motorcycles			
3.1 Make: GMC		Who has an interest in	n the property? Check one	Do not deduct secured cla	•
Model: Yukon		■ Debtor 1 only		the amount of any secure Creditors Who Have Clair	
Year: 2004		Debtor 2 only		Current value of the	Current value of the
Approximate mileage:	190000	Debtor 1 and Debtor	· ·	entire property?	portion you own?
Other information:		☐ At least one of the d	ebtors and another		
		Check if this is con (see instructions)	nmunity property	\$6,000.00	\$6,000.00
3.2 Make: Nissan		_	the property? Check one	Do not deduct secured clarate amount of any secure	d claims on Schedule D:
Model: Altima		■ Debtor 1 only		Creditors Who Have Clair	ns Secured by Property.
Year: 2014 Approximate mileage:	110000	☐ Debtor 2 only ☐ Debtor 1 and Debtor	r 2 only	Current value of the entire property?	Current value of the portion you own?
Other information:		☐ At least one of the d	•	cimo proporty:	portion you onthe
		Check if this is con (see instructions)		\$8,075.00	\$8,075.00
		. ,			
Water and almost a sector by	ATV I		abitata a di annabitata a an		
. Watercraft, aircraft, motor ho Examples: Boats, trailers, moto					
	, p 5. 55 mar mate				
■ No					

☐ Yes

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Debtor	Toussaint Jerrod Rowland	Case number (if known)	
	d the dollar value of the portion you own for all of your entries from Parges you have attached for Part 2. Write that number here		\$14,075.00
Part 3:	Describe Your Personal and Household Items		
	u own or have any legal or equitable interest in any of the following iten	ns?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Exar	sehold goods and furnishings amples: Major appliances, furniture, linens, china, kitchenware No Yes. Describe		
	1 BR, LR, DR		\$1,000.00
Exar	ctronics amples: Televisions and radios; audio, video, stereo, and digital equipment; of including cell phones, cameras, media players, games No Yes. Describe	computers, printers, scanners; music co	llections; electronic devices
	1 TV, Cell Phone, Tablet, Play Station 4		\$700.00
Exar No Period Ye Security Exar No	res. Describe sipment for sports and hobbies amples: Sports, photographic, exercise, and other hobby equipment; bicycles musical instruments		
	xamples: Pistols, rifles, shotguns, ammunition, and related equipment		
	.45 XD		\$300.00
	xamples: Everyday clothes, furs, leather coats, designer wear, shoes, access	ories	
	Clothes and Shoes		\$250.00
	kamples: Everyday jewelry, costume jewelry, engagement rings, wedding ring	gs, heirloom jewelry, watches, gems, go	old, silver

13. Non-farm animals

Examples: Dogs, cats, birds, horses

■ No

Official Form 106A/B Schedule A/B: Property

\$0.00

None

Debtor 1	Toussaint Jerrod R	owland	Document	Page 17	of 55 Case number (if known)	
_		DWIAIIU			Odde Humber (II known)	
☐ Yes.	Describe					
14. Any o	ther personal and house	hold items you d	id not already list,	including any h	health aids you did not list	
■ No	0					
☐ Yes.	Give specific information					
	the dollar value of all of art 3. Write that number	•		-	pages you have attached	\$2,250.00
Part 4: De	escribe Your Financial Asset	ts				
	wn or have any legal or e		in any of the follow	wing?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	ples: Money you have in y	•		oosit box, and or	n hand when you file your petiti	on
					Cash	\$30.00
Exam	sits of money ples: Checking, savings, o institutions. If you ha			stitution, list eac	res in credit unions, brokerage l ch.	nouses, and other similar
	17.1.	Checking	Wells Fa	ırgo		\$400.00
	17.2.	Saving	Wells Fa	ırgo		\$30.00
IS Bonds	s, mutual funds, or public	cly traded stocks				
	ples: Bond funds, investme			oney market acc	ounts	
■ No						
☐ Yes.		Institution or issu	er name:			
joint	ublicly traded stock and venture	interests in inco	rporated and uninc	corporated bus	inesses, including an interes	t in an LLC, partnership, and
■ No	Cive en ecific information	about them				
☐ Yes.	Give specific information Na	me of entity:			% of ownership:	
Nego	nment and corporate bo tiable instruments include p negotiable instruments are	personal checks, o	cashiers' checks, pro	omissory notes,	ruments and money orders.	
■ No	regenable menamente are	those you ournot	transfer to someone	, by signing or a	ciivoinig them.	
	Give specific information lss	about them uer name:				
	ment or pension accoun ples: Interests in IRA, ERI		, 403(b), thrift saving	gs accounts, or	other pension or profit-sharing	plans
	List each account separa Type	tely. of account:	Institution	name:		
	401 ((k)	Employe	er .		\$2,000.00
				·		

Official Form 106A/B Schedule A/B: Property page 3

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22.	Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, No	or others
	Yes Institution name or individual:	
23.	Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No	
	Yes Issuer name and description.	
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	n.
	☐ Yes	
25.	Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercis ■ No	able for your benefit
	☐ Yes. Give specific information about them	
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No	
	☐ Yes. Give specific information about them	
27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No	
	☐ Yes. Give specific information about them	
M	oney or property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you	
	■ No Yes. Give specific information about them, including whether you already filed the returns and the tax years	
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property sett No ☐ Yes. Give specific information	lement
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation benefits; unpaid loans you made to someone else No	on, Social Security
	☐ Yes. Give specific information	
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No	
	Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive someone has died.	property because
	☐ Yes. Give specific information	

Official Form 106A/B Schedule A/B: Property page 4

Debtor 1

			Dago 10 of 55	9 Desc Main
Debtor 1	Toussaint Jerrod Rowland	Document	Page 19 of 55 Case number (if known)	
	s against third parties, whether or not you haples: Accidents, employment disputes, insuran			
■ No				
☐ Yes	. Describe each claim			
34. Other ■ No	contingent and unliquidated claims of ever	y nature, includir	ng counterclaims of the debtor and rights to	o set off claims
	. Describe each claim			
35. Any f	inancial assets you did not already list			
■ No				
☐ Yes	. Give specific information			
	the dollar value of all of your entries from P Part 4. Write that number here			\$2,460.00
Part 5: D	escribe Any Business-Related Property You Own	or Have an Interest	In. List any real estate in Part 1.	
37. Do yo u	ı own or have any legal or equitable interest in any	/ business-related p	property?	
■ No. G	Go to Part 6.			
☐ Yes.	Go to line 38.			
	escribe Any Farm- and Commercial Fishing-Relate		n or Have an Interest In.	
lf	you own or have an interest in farmland, list it in Part	1.		
	ou own or have any legal or equitable interes	st in any farm- or	commercial fishing-related property?	
■ No	o. Go to Part 7.			
☐ Ye	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Inte	erest in That You Di	d Not List Above	
53. Do yo <i>Exan</i>	ou have other property of any kind you did no	ot already list?		
■ No	proc. Coasen nonce, country stab membership			
	. Give specific information			
54. Add	the dollar value of all of your entries from P	art 7. Write that r	number here	\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Part	1: Total real estate, line 2			\$0.00
	2: Total vehicles, line 5		\$14,075.00	
	3: Total personal and household items, line		\$2,250.00	
	4: Total financial assets, line 36	_	\$2,460.00	
59. Part	5: Total business-related property, line 45	_	\$0.00	
	6: Total farm- and fishing-related property,	line 52	\$0.00	
61. Part	7: Total other property not listed, line 54	+	\$0.00	

63. Total of all property on Schedule A/B. Add line 55 + line 62

62. **Total personal property.** Add lines 56 through 61...

\$18,785.00

\$18,785.00

Official Form 106A/B Schedule A/B: Property page 5

\$0.00

Copy personal property total

\$18,785.00

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Fill in this infor	mation to identify your				
Debtor 1	Toussaint Jerrod	Rowland			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANTA [DIVISION	
Case number					
(if known)					Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemp	tions are you claimin	g? Check one only.	even if your spous	e is filing with you

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2004 GMC Yukon 190000 miles Line from <i>Schedule A/B</i> : 3.1	\$6,000.00		\$0.00	O.C.G.A. § 44-13-100(a)(3)
			100% of fair market value, up to any applicable statutory limit	
2014 Nissan Altima 110000 miles Line from Schedule A/B: 3.2	\$8,075.00		\$5,000.00	O.C.G.A. § 44-13-100(a)(3)
Line IIIII Scriedule A/B. 3.2			100% of fair market value, up to any applicable statutory limit	
1 BR, LR, DR Line from Schedule A/B: 6.1	\$1,000.00		\$1,000.00	O.C.G.A. § 44-13-100(a)(4)
Ellie Helli Gohedule / V.B. Gii			100% of fair market value, up to any applicable statutory limit	
1 TV, Cell Phone, Tablet, Play Station	\$700.00		\$700.00	O.C.G.A. § 44-13-100(a)(4)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
.45 XD Line from Schedule A/B: 10.1	\$300.00		\$300.00	O.C.G.A. § 44-13-100(a)(6)
Ellic Hotti Goricadio 77 D. 1011			100% of fair market value, up to any applicable statutory limit	

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Case number (if known)

	- Cuccami Con Cu Noviana							
	Brief description of the property and line on Schedule A/B that lists this property Current value of the portion you own Copy the value from			ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption			
		Schedule A/B	One	to the box for each exemption.				
	Clothes and Shoes Line from Schedule A/B: 11.1	\$250.00		\$250.00	O.C.G.A. § 44-13-100(a)(4)			
	Ello Holli Golfadalo 772.			100% of fair market value, up to any applicable statutory limit				
	None Line from Schedule A/B: 12.1	\$0.00		\$0.00	O.C.G.A. § 44-13-100(a)(5)			
	Elle Holli Goricdale 775. Tall			100% of fair market value, up to any applicable statutory limit				
	Cash Line from Schedule A/B: 16.1	\$30.00		\$30.00	O.C.G.A. § 44-13-100(a)(6)			
	Line Holli Galledale A.D. 10.1			100% of fair market value, up to any applicable statutory limit				
	Checking: Wells Fargo Line from Schedule A/B: 17.1	\$400.00		\$400.00	O.C.G.A. § 44-13-100(a)(6)			
	Elle Holli Goricadae 775. TTT			100% of fair market value, up to any applicable statutory limit				
	Saving: Wells Fargo Line from Schedule A/B: 17.2	\$30.00		\$30.00	O.C.G.A. § 44-13-100(a)(6)			
	Elle Holli Goriedale 775. TTL			100% of fair market value, up to any applicable statutory limit				
	401 (k): Employer Line from Schedule A/B: 21.1	\$2,000.00		\$2,000.00	O.C.G.A. § 44-13-100(a)(2.1)			
	2.10 110.11 00.1004410 7.9.2. 2 · · ·			100% of fair market value, up to any applicable statutory limit				
3.	 Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) No 							
	☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?☐ No☐ Yes							

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			Document F	Page 22	of 55	<u></u>	
Fill	in this inform	nation to identify you	ır case:				
Deb	otor 1	Toussaint Jerro	d Rowland				
		First Name		ast Name			
	otor 2						
(Spo	use if, filing)	First Name	Middle Name L	ast Name			
Uni	ted States Bar	nkruptcy Court for the:	NORTHERN DISTRICT OF GEOF	RGIA - ATLA	NTA DIVISION		
	se number					☐ Chec	ck if this is an
						ame	nded filing
	icial Form hedule		Who Have Claims Se	ecured	by Property	У	12/15
Be a	s complete and	accurate as possible.	If two married people are filing together, out, number the entries, and attach it to t	both are equa	ally responsible for su	pplying correct inforn	
1. Do	any creditors	have claims secured by	your property?				
	□ No. Check	this box and submit the	nis form to the court with your other scl	hedules. You	ı have nothing else t	o report on this form.	
	_	all of the information		11000100. 100	Thave from ing close t		
			pelow.				
Par	List Al	I Secured Claims			Column A	Column B	Column C
			more than one secured claim, list the credito a particular claim, list the other creditors in		Amount of claim	Value of collateral	Unsecured
			cal order according to the creditor's name.	Fait 2. As	Do not deduct the	that supports this	portion
2.1	Familyfire	tou Eko Etou	Describe the property that secures the	alaimı	value of collateral. \$6,799.00	claim	If any \$799.00
2.1	Creditor's Name	tcu Fka Ftcu	2004 GMC Yukon 190000 miles		\$0,799.00	\$6,000.00	_ \$799.00
			2004 GIMC TUKON 190000 IIIIles	•			
	3604 Atlar		As of the date you file, the claim is: Che apply.	ck all that			
	Hapeville,	GA 30354	☐ Contingent				
	Number, Street,	City, State & Zip Code	☐ Unliquidated				
			☐ Disputed				
Who	o owes the de	bt? Check one.	Nature of lien. Check all that apply.				
I	Debtor 1 only		An agreement you made (such as mor	tgage or secu	red		
	Debtor 2 only		car loan)				
	Debtor 1 and De	btor 2 only	☐ Statutory lien (such as tax lien, mecha	nic's lien)			
	At least one of th	ne debtors and another	☐ Judgment lien from a lawsuit				
	Check if this cla community del	aim relates to a bt	Other (including a right to offset)				
		Opened					

0111

Last 4 digits of account number

01/19 Last Active

Date debt was incurred 5/16/19

Debtor 1 Toussaint Jerrod Rowland				Case number (if known)					
	First Name	Middle Na	ame Last Name	•					
2.2	First Investors	Financial	Describe the property that secures the claim:	\$10,175.00	\$8,075.00	\$2,100.00			
	Creditor's Name Attn: Bankrup	•	2014 Nissan Altima 110000 miles						
380 Interstate North Parkway, Suite 300 Atlanta, GA 30399		e 300	As of the date you file, the claim is: Check all the apply. Contingent	t					
Number, Street, City, State & Zip Code Unliquidated									
Who	owes the debt? C	heck one.	Nature of lien. Check all that apply.						
■ Debtor 1 only □ Debtor 2 only			An agreement you made (such as mortgage or secured car loan)						
	ebtor 1 and Debtor 2 t least one of the deb	•	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit						
☐ Check if this claim relates to a community debt			Other (including a right to offset)						
Date	debt was incurred	Opened 05/17 Last Active 05/19	Last 4 digits of account number 000	01					
	d the dellaward		Annual Annual Control of the Control	640.074.0	0				
If t		of your form, add	olumn A on this page. Write that number here: the dollar value totals from all pages.	\$16,974.0 \$16,974.0					

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document	Page 24 of	55		
Fill in this info	rmation to identify your	case:				
Debtor 1	Toussaint Jerrod	Rowland				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States E	Sankruptcy Court for the:	NORTHERN DISTRICT OF C	GEORGIA - ATLANT	A DIVISION		
Case number (if known)					_	if this is an
	E/F: Creditors W	ho Have Unsecured		for and the south NON	IDDIODITY alaine. I	12/15
iny executory co Schedule G: Exec Schedule D: Cred eft. Attach the Co	ntracts or unexpired leases cutory Contracts and Unexp litors Who Have Claims Sec	e Part 1 for creditors with PRIOR that could result in a claim. Also irred Leases (Official Form 106G), ured by Property. If more space is e. If you have no information to r	o list executory contra . Do not include any c is needed, copy the Pa	cts on Schedule A/B: F reditors with partially s art you need, fill it out,	Property (Official For secured claims that a number the entries i	rm 106A/B) and on are listed in in the boxes on the
Part 1: List	All of Your PRIORITY Un	secured Claims				
1. Do any cred	itors have priority unsecure	d claims against you?				
☐ No. Go to	Part 2.					
Yes.						
identify what possible, list	type of claim it is. If a claim ha the claims in alphabetical orde	s. If a creditor has more than one pr is both priority and nonpriority amoust ar according to the creditor's name. rticular claim, list the other creditors	unts, list that claim here If you have more than t	and show both priority a	and nonpriority amoun	nts. As much as
(For an expla	nation of each type of claim, s	ee the instructions for this form in the	he instruction booklet.)			
				Total claim	Priority amount	Nonpriority amount
2.1 Georg	ia Department of Reve	enue Last 4 digits of acco	ount number	\$1,500.00	\$1,500.00	
Priority (Creditor's Name liance Division	When was the debt		<u> </u>	<u> </u>	
1800 (<u>Atlant</u>	Bankruptcy Century BLVD NE Suit a, GA 30345-3202					
	Street City State Zip Code red the debt? Check one.	<u>_</u>	ile, the claim is: Check	all that apply		
_		☐ Contingent				
■ Debtor ′	•	☐ Unliquidated				
☐ Debtor 2	2 only	☐ Disputed				
Debtor 1	and Debtor 2 only	Type of PRIORITY u				
☐ At least	one of the debtors and anothe		•			
☐ Check i	f this claim is for a commur		other debts you owe th			
_	subject to offset?	☐ Claims for death of	or personal injury while	you were intoxicated		
■ No		Other. Specify				_
☐ Yes		1	Taxes			

Debto	Toussaint Jerrod Rowland		Case number (if known)		
2.2	IRS	Last 4 digits of account number	\$3,000.00	\$3,000.00 \$0	.00
	Priority Creditor's Name 401 W. Peachtree St., NW Stop #334-D	When was the debt incurred?			
	Room 400				
	Atlanta, GA 30308				
,	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply		
	_	☐ Contingent			
	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations			
	☐ Check if this claim is for a community debt	Taxes and certain other debts you	owe the government		
1	Is the claim subject to offset?	☐ Claims for death or personal injury	while you were intoxicated		
	■ No	☐ Other. Specify			
	☐ Yes	Taxes			
D(2: List All of Your NONPRIORITY Unsecu	and Olehan			
4. Li	No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nescured claim, list the creditor separately for each clain one creditor holds a particular claim, list the other art 2.	alphabetical order of the creditor who laim. For each claim listed, identify what t	holds each claim. If a creditor has ype of claim it is. Do not list claims a	already included in Part 1. If more fill out the Continuation Page of	;
				Total claim	
4.1	Acima Credit Nonpriority Creditor's Name	Last 4 digits of account number	5606	\$559.	00
	9815 Monroe Street 4th Floor Sandy, UT 84070	When was the debt incurred?	Opened 07/17 Last Activ 6/15/18	/e	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only				
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you	u did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other Specify Lease			

Case 19-60898-wlh Doc 1 Filed 07/12/19 Entered 07/12/19 15:36:29 Desc Main Document Debtor 1 Toussaint Jerrod Rowland ase number (if known) 4.2 Aes/pheaaelt Last 4 digits of account number 0001 \$21,446.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 12/05 Last Active Po Box 2461 When was the debt incurred? 5/19/19 Harrisburg, PA 17105 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ■ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.3 Afni, Inc. Last 4 digits of account number 7607 \$351.00 Nonpriority Creditor's Name Attn: Bankruptcy **Opened 07/18** When was the debt incurred? Po Box 3427 **Bloomington, IL 61702** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Comcast ☐ Yes **Atlanta Spine PC** 4.4 Last 4 digits of account number \$275.00 Nonpriority Creditor's Name PO Box 14000 When was the debt incurred? 2018

Belfast, ME 04915 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Medical Services

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Document Debtor 1 Toussaint Jerrod Rowland Case number (if known) 4.5 \$315.00 Capital One Last 4 digits of account number 6866 Nonpriority Creditor's Name Attn: Bankruptcy Opened 03/17 Last Active Po Box 30285 When was the debt incurred? 5/15/17 Salt Lake City, UT 84130 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes Collectron Of Atlanta/Carter-Young 4.6 Last 4 digits of account number 1868 \$139.00 Nonpriority Creditor's Name Attention: Bankruptcv Opened 04/17 Last Active Po Box 92269 When was the debt incurred? 11/16 Atlanta, GA 30014 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney South Gwinnett** ☐ Yes Other. Specify Radiology 4.7 Comcast Last 4 digits of account number \$351.00 Nonpriority Creditor's Name P.O. Box 530098 2018 When was the debt incurred? Atlanta, GA 30353 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Account

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

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Emory University Hosp. Midtown

Nonpriority Creditor's Name P.O. Box 406939

Atlanta, GA 30384-6939

Number Street City State Zip Code

Who incurred the debt? Check one.

■ Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community

debt

Is the claim subject to offset?

■ No

☐ Yes

Last 4 digits of account number

When was the debt incurred?

2018

As of the date you file, the claim is: Check all that apply

☐ Contingent

■ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

 \square Obligations arising out of a separation agreement or divorce that you did not

report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Medical Services

\$262.00

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Document Debtor 1 Toussaint Jerrod Rowland ase number (if known) **Gastroenterology Anesthesia** 4.1 \$65.00 **Associates** Last 4 digits of account number Nonpriority Creditor's Name 4754 E. State Rd 64 When was the debt incurred? 2018 Bradenton, FL 34208-9058 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No **Medical Services** ☐ Yes Other. Specify 4.1 Ig Data International 5538 \$776.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 11/15 Last Active Po Box 39 When was the debt incurred? 5/31/17 Bothell, WA 98041 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Magnolia Park Ga ☐ Yes 4.1 Medcore \$523.00 Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 1978 When was the debt incurred? 2018 Norcross, GA 30091 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

Official Form 106 E/F

debt

■ No

☐ Yes

■ Other. Specify Medical Services

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

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Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Services ☐ Yes

Debto	Toussaint Jerrod Rowland	————————	Case number (if known)	
4.1	Pathology & Laboratory medicine pc	Last 4 digits of account number		\$31.00
	Nonpriority Creditor's Name 3300 Buckeye Road Suie 178 Atlanta, GA 30341	When was the debt incurred?	2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical Se	rvices	
4.1	Phoenix Financial Services. Llc	Last 4 digits of account number	3473	\$239.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 361450	When was the debt incurred?	Opened 01/19 Last Active 11/16	
	Indianapolis, IN 46236 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Phys Llc	Attorney Maroon Bells Emerg	
4.1	Rockdale Family Practice	Last 4 digits of account number		\$106.00
	Nonpriority Creditor's Name 2020 Honey Creek PKWY Conyers, GA 30013	When was the debt incurred?	2018	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	

☐ Yes

Other. Specify Medical Services

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Page 32 of 55 Case number (if known) Document Debtor 1 Toussaint Jerrod Rowland 4.2 **Rockdale Medical Center** \$443.00 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 102291 When was the debt incurred? 2018 Atlanta, GA 30369 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Services ☐ Yes 4.2 Sprint \$948.00 Last 4 digits of account number Nonpriority Creditor's Name 6391 Sprint Pkwy When was the debt incurred? 2018 Overland Park, KS 66251 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Account 4.2 Suntrust Bank \$20,000.00 Last 4 digits of account number Nonpriority Creditor's Name Legal Dept/Bankruptcy When was the debt incurred? 2018 PO Box 85041 Richmond, VA 23286 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:

debt

■ No

☐ Yes

 \square Obligations arising out of a separation agreement or divorce that you did not

 \square Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

■ Other. Specify Account

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

Debtor 1	Toussaint Jerrod Rowland		3 of 55 Case number (if known)	, iviali i	
J	Wakefield & Associates	Last 4 digits of account number	9099	\$736.00	
-	Nonpriority Creditor's Name Attn: bankruptcy 7005 Middlebrook Pike Knoxville, TN 37909	When was the debt incurred?	Opened 08/14		
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply		
,	Who incurred the debt? Check one.				
I	Debtor 1 only	☐ Contingent			
1	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
1	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not		
ı	Is the claim subject to offset?	report as priority claims	,		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
ı	□Yes	■ Other. Specify Physicians	Attorney Acs Primary Care So		
	World Acceptance Corp	Last 4 digits of account number	5501	\$1,213.00	
<i>.</i> 1	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 6429	When was the debt incurred?	Opened 05/19 Last Active 5/31/19		
	Greenville, SC 29606 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply		
	Who incurred the debt? Check one.	7.5 of the date you me, the claim.	o. Oncor an mar appry		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
1	☐ Yes	Other. Specify Secured			
4.2	World Finance	Last 4 digits of account number		\$2,000.00	
!	Nonpriority Creditor's Name 557 Riverstone Pkwy	When was the debt incurred?	2018		
	Suite 110 Canton, GA 30114				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
1	Debtor 1 only	☐ Contingent			
1	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	☐ Student loans			

Part 3: List Others to Be Notified About a Debt That You Already Listed

 \square Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

debt

No ☐ Yes

■ Other. Specify Account

report as priority claims

Is the claim subject to offset?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Debtor 1 Toussaint Jerrod Rowland

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	4,500.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	4,500.00
				7	Total Claim
	6f.	Student loans	6f.	\$	21,446.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	31,769.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	53,215.00

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Fill in this infor	mation to identify your			
Debtor 1	Toussaint Jerrod			
	First Name	Middle Name	Last Name	-
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	-
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF GEORGIA - ATLANTA DIVISION	-
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.4	•				
	Name				_
	Number	Street			-
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

Case 19-60898-wlh Doc 1 Filed 07/12/19 Entered 07/12/19 15:36:29 Desc Main

		Docume	nt Page 36 c	of 55	
Fill in this	information to identify your				
Dobtor 1	Toussaint Jerrod	Dowlead			
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLAN	ITA DIVISION	
Case numl	hor				
(if known)					☐ Check if this is an
					amended filing
Sched Codebtors people are fill it out, a your name	e filing together, both are equent number the entries in the eand case number (if known) you have any codebtors? (If	re also liable for any debt ally responsible for supp boxes on the left. Attach . Answer every question.	lying correct informat the Additional Page t	ion. If more space is no o this page. On the top	te as possible. If two married eeded, copy the Additional Page, of any Additional Pages, write
No. Yes 3. In Colin line Form	e 2 again as a codebtor only i	use, or legal equivalent live fors. Do not include your f that person is a guarant	with you at the time? spouse as a codebtor or or cosigner. Make	if your spouse is filing sure you have listed th	g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
out Co	olumn 2.				
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Codo			ditor to whom you owe the debt
	rvame, rvamber, otreet, oity, otate and z	0000		Check all schedule	з тат арріу.
3.1				☐ Schedule D, line	3
	Name			□ Schedule E/F, li	ne
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		
3.2				Schedule D, line	e
	Name			☐ Schedule E/F, li	
				☐ Schedule G, line	e
-	Number Street			_	
	City	State	ZIP Code		

Debtor 1 Toussaint Jerrod Rowland Debtor 2 Spower, Iffina) United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION Case number (If woon) Official Form 106! Schedule I: Your Income Bo as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate spage with information. If you have more than one job, attach a separate spage with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Employer's address Occupation may include student or homemaker, if it applies. Boy be talish about Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse and page with the form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse are separated. If you or your non-filling spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,346.00 \$ NIA Scalutate gross Income. Add line 2 + line 3. 4. \$ 2,346.00 \$ NIA	Fill	in this information to identif	fy your cas	e:							
United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA - ATLANTA Case number											
Case number (It known) Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date: MM / DD/ YYYY							_				
Official Form 106 Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1: Describe Employment 1. Fill in your employment information. Part 2: Debtor 1 Debtor 2 or non-filling spouse Employer's name Employer's name Employer's address 30 Jesse Hill Jr. Drive SE Atlanta, GA 30303 How long employed there? 5 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. Hill the following date: MM / DD/YYYY 12/15 12/15 12/15 12/15 12/15 12/15 13/16 13/16 14/16 15/16 15/16 16/16 1	Uni	ted States Bankruptcy Cou	ırt for the:		CT OF GEORGIA - ATL	_ANTA	_				
Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If wo was separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Park 1: Describe Employment 1. Fill in you remployment information about additional employers. If you have more than one job, attach a separate page with information about additional employers. Occupation Patient Care Associacte Employer's name Employer's name Employer's address Occupation Patient Care Associacte Employer's address 80 Jesse Hill Jr. Drive SE Atlanta, GA 30303 How long employed there? 5 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be. 3. +\$ 0.00 +\$ N/A	(If kr	nown)						An amende A suppleme	d filing ent showing		chapter
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If wo are separated and your spouse is not filing with you, do not include information about your spouse. If you have more than one job, attach a separate page with information about additional employers. Part 1:			_				Ī	MM / DD/ Y	YYY		
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1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation Employer's name Employer's address or homemaker, if it applies. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,346.00 \$ N/A	sup spo atta	plying correct information use. If you are separated ch a separate sheet to thi	n. If you ar and your s is form. Or	e married and not filir spouse is not filing wi	ng jointly, and your sp th you, do not include	oouse i e inforr	ร living witl nation aboเ	n you, inclu It your spo	ude inform use. If mo	ation about re space is i	your needed,
If you have more than one job, attach a separate page with information about additional employers. Cocupation Patient Care Associacte Cocupation may include student or homemaker, if it applies. Cocupation may include student or homemaker, if it applies. Employer's address or homemaker, if it applies. Employer's address or homemaker, if it applies. Employer's address So Jesse Hill Jr. Drive SE Atlanta, GA 30303	Par	t 1: Describe Emplo	oyment								
attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Atlanta, GA 30303 How long employed there? Sive Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,346.00 \$ N/A N/A	1.		t		Debtor 1			Debtor 2	or non-fili	ing spouse	
Include part-time, seasonal, or self-employed work. Occupation Patient Care Associacte Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address 80 Jesse Hill Jr. Drive SE Atlanta, GA 30303 How long employed there? 5 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,346.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A				Employment status	■ Employed						
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Atlanta, GA 30303 How long employed there? 5 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,346.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A			nal, or	Employer's name	Grady Hospital						
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A				Employer's address			SE				
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A				How long employed th	nere? 5 years			. <u>—</u>			
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2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,346.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A					embine the information	for all e	mployers fo	r that perso	n on the lin	es below. If y	ou need
2. deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$							For De	ebtor 1			
	2.					2.	\$	2,346.00	\$	N/A	
4. Calculate gross Income. Add line 2 + line 3. 4. \$\ \[\\$ \ \ \] N/A	3.	Estimate and list month	nly overtim	e pay.		3.	+\$	0.00	+\$	N/A	
	4.	Calculate gross Income	. Add line	2 + line 3.		4.	\$\$	346.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Toussaint Jerrod Rowland	-	Ca	ase nu	mber (if known)	_			
				I	For De	ebtor 1		For Debt	or 2 or g spouse	
	Cop	by line 4 here	4.	5	\$	2,346.00	9	.	N/A	<u>\</u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	9	\$	313.00	9	;	N/A	
	5b.	Mandatory contributions for retirement plans	5b.		<u> </u>	0.00			N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		· •	66.00	9		N/A	_
	5d.	Required repayments of retirement fund loans	5d.	. 9	\$	0.00	. 9	;	N/A	
	5e.	Insurance	5e.	. 9	\$	183.00	9	;	N/A	\
	5f.	Domestic support obligations	5f.		\$	0.00	. 9	;	N/A	_
	5g.	Union dues	5g.			0.00	. 9		N/A	
	5h.	Other deductions. Specify:	_ 5h.	.+ :	₿	0.00	+ \$	·	N/A	<u>\</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	S	562.00	. 9		N/A	<u>\</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	·	1,784.00	. 9	·	N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$	0.00	9	6	N/A	
	8b.	Interest and dividends	8b.	. 9	\$	0.00	. 9	;	N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$	0.00	9	\$	N/A	\
	8d.	Unemployment compensation	8d.	. 9	\$	0.00	. 9	;	N/A	<u></u>
	8e.	Social Security	8e.	. 9	\$	0.00	. 9	;	N/A	\
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.00			N/A	
	8g.	Pension or retirement income	8g.		∮	0.00	٠. ١		N/A	_
	8h.	Other monthly income. Specify: Part-Time Job	_ 8h.	.+ :	\$	809.00	+ 1	'	N/A	<u>\</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		809.00	\$	S	N/	'A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	21	593.00 + \$		N/	A = \$	2,593.00
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ	۷,۰	.		147	-	2,000.00
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe				,	in <i>Sched</i>	lule J. 1. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certain lies							2. \$	2,593.00
13.	Do	you expect an increase or decrease within the year after you file this form	?						Comb	ined Ily income
		No.								

Official Form 106l Schedule I: Your Income page 2

	information to identify yo					
Debtor 1	Toussaint Je	errod Rowland			k if this is:	
Debtor 2					An amended filing A supplement show	ving postpetition chapte
(Spouse, if	filing)			1	13 expenses as of	the following date:
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT OF CATLANTA DIVISION	GEORGIA -	N	MM / DD / YYYY	
Case numb (If known)	ber					
	al Form 106J					
	dule J: Your I					12
informati	mpiete and accurate as ion. If more space is ned (if known). Answer ever Describe Your House	•	this form. On the top of any a	e equa Idditio	nal pages, write y	our name and case
	nis a joint case?					
	lo. Go to line 2. 'es. Does Debtor 2 live i	n a separate household?				
	□ No	st file Official Form 106J-2, <i>Expe</i>	enses for Separate Household c	f Debto	or 2.	
2. Do y	ou have dependents?	□ No				
	not list Debtor 1 and tor 2.	■ Yes. Fill out this information each dependent	•	to	Dependent's age	Does dependent live with you?
Do n	not state the					□ No
depe	endents names.		Son		4	■ Yes □ No
						☐ Yes
						□ No
						☐ Yes
						□ No □ Yes
,	your expenses include enses of people other thr rself and your depender					LI Tes
your Part 2: Estimate	s as of a date after the b	ng Monthly Expenses our bankruptcy filing date unle pankruptcy is filed. If this is a s				
your Part 2: Estimate expenses applicabl nclude e he value	your expenses as of your expenses as of a date after the ble date. expenses paid for with responses.	our bankruptcy filing date unle	supplemental <i>Schedule J</i> , cho			f the form and fill in th
your Part 2: Estimate expenses applicabl nclude e he value Official F	your expenses as of yos as of a date after the ble date. expenses paid for with rest of such assistance and Form 106I.)	our bankruptcy filing date unle bankruptcy is filed. If this is a s non-cash government assistar d have included it on <i>Schedul</i> hip expenses for your residen	supplemental <i>Schedule J</i> , cho nce if you know le I: Your Income		e box at the top of	f the form and fill in th
your Part 2: Estimate expenses pplicable include e he value official F	your expenses as of your expenses as of a date after the belle date. expenses paid for with resort of such assistance and Form 106I.)	our bankruptcy filing date unle bankruptcy is filed. If this is a s non-cash government assistar d have included it on <i>Schedul</i> hip expenses for your residen	supplemental <i>Schedule J</i> , cho nce if you know le I: Your Income	eck the	e box at the top of	f the form and fill in th
your Part 2: Estimate expenses pplicable include e he value official F	eyour expenses as of your expenses as of a date after the ble date. expenses paid for with resort of such assistance and Form 106I.) rental or home ownersly ments and any rent for the	our bankruptcy filing date unle bankruptcy is filed. If this is a s non-cash government assistar d have included it on <i>Schedul</i> hip expenses for your residen	supplemental Schedule J, chonce if you know le I: Your Income	eck the	e box at the top of	f the form and fill in th
your Part 2: Estimate expenses applicable neclude e he value Official F The payn If no 4a. 4b.	eyour expenses as of your expenses as of a date after the balle date. expenses paid for with response of such assistance and Form 106I.) rental or home owners ments and any rent for the out included in line 4: Real estate taxes Property, homeowner's	our bankruptcy filing date unless and have included it on Schedule hip expenses for your residence ground or lot.	supplemental Schedule J, chence if you know le I: Your Income	4. \$ 4a. \$ 4b. \$	e box at the top of	850.00 0.00 0.00
your Part 2: Estimate expenses pplicable include e he value official F The paynum of	expenses as of your expenses as of your expenses as of a date after the ble date. expenses paid for with resort of such assistance and Form 106L) rental or home owners ments and any rent for the ot included in line 4: Real estate taxes Property, homeowner's Home maintenance, re	our bankruptcy filing date unle bankruptcy is filed. If this is a s non-cash government assistar d have included it on Schedule hip expenses for your residen e ground or lot.	supplemental Schedule J, chence if you know le I: Your Income	4. \$	e box at the top of	the form and fill in tenses 850.00

Debtor 1	Toussaint Jerrod Rowland	Case num	ber (if known)	
6. Utili :	ies.			
6a.	Electricity, heat, natural gas	6a.	\$	130.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
6d.	Other. Specify: Cellular Phone	6d.		100.00
ou.	Cable/Internet		\$	130.00
. Foo	and housekeeping supplies	_{7.}	\$	300.00
	dcare and children's education costs	7. 8.	\$	174.00
	ning, laundry, and dry cleaning	9.	\$ 	20.00
	onal care products and services	10.	\$	-
	ical and dental expenses	11.	·	20.00
	•	11.	Φ	50.00
	sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12.	\$	304.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	itable contributions and religious donations	14.	\$	0.00
5. Insu	•			0.00
	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	220.00
15d.	Other insurance. Specify:	15d.	\$	0.00
6. Taxe	s. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spec		16.	\$	0.00
7. Insta	Illment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	295.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as	_	•	0.00
	icted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	0.00
	r payments you make to support others who do not live with you.		\$	0.00
Spec	·	19.	_	
	r real property expenses not included in lines 4 or 5 of this form or on Sched			0.00
	Mortgages on other property	20a.	· -	0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20e.	· -	0.00
1. Othe	r: Specify:	21.	+\$	0.00
2 Calo	ulate your monthly expenses			
	Add lines 4 through 21.		\$	2,593.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	2,000.00
				0.500.00
22C.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,593.00
3. Calc	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,593.00
	Copy your monthly expenses from line 22c above.	23b.	-\$	2,593.00
23c.	Subtract your monthly expenses from your monthly income.			2.22
	The result is your monthly net income.	23c.	\$	0.00
For e modi				or decrease because of a
ΠY	es. Explain here:		<u> </u>	

Case 19-60898-wlh Doc 1 Filed 07/12/19 Entered 07/12/19 15:36:29 Desc Main

		ocument 1 age 41 of 55	
Fill in this infor	mation to identify your case:		
Debtor 1	Toussaint Jerrod Rowland		
Debior 1	First Name Middle Name	e Last Name	
Debtor 2 (Spouse if, filing)	First Name Middle Name	e Last Name	
United States Ba	ankruptcy Court for the: NORTHERN D	DISTRICT OF GEORGIA - ATLANTA DIVISION	
Case number (if known)			☐ Check if this is an amended filing
Official Fo		ividuals Filing Under Chapte	er 7 12/15
	lividual filing under chapter 7, you must	t fill out this form if:	
_	ve claims secured by your property, or		
You must file th	ever is earlier, unless the court extends	s not expired. ter you file your bankruptcy petition or by the date se the time for cause. You must also send copies to th	
	eople are filing together in a joint case, nd date the form.	both are equally responsible for supplying correct ir	formation. Both debtors must
Be as complete	and accurate as possible. If more space	e is needed, attach a separate sheet to this form. On	the top of any additional pages,
write y	our name and case number (if known).		
Part 1: List Y	our Creditors Who Have Secured Claim	ns	
1. For any credit	•	e D: Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
	reditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
		Secures a dest:	as exempt on ochequie o:
Creditor's F	Familyfirstcu Fka Ftcu	= 0	□ No
name:	umymstea i ka i tea	Surrender the property.Retain the property and redeem it.	□ NO
		☐ Retain the property and redeem it.	■ Yes
Description of property	2004 GMC Yukon 190000 miles	Reaffirmation Agreement. Retain the property and [explain]:	
securing debt	:	— Retain the property and [explain].	_
Creditor's F	First Investors Financial Services	☐ Surronder the property	
name:	vesters i maneiar dei vides	☐ Surrender the property. ☐ Retain the property and redeem it.	□ INU
Description of	f 2014 Nissan Altima 110000	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property	miles	Realifimation Agreement. Retain the property and [explain]:	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

☐ Retain the property and [explain]:

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

securing debt:

Debtor 1 Toussaint Jerrod Rowland	Case number (if known)
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any perpenty that is subject to an unexpired lease.	property of my estate that secures a debt and any personal
X /s/ Toussaint Jerrod Rowland X	ture of Debtor 2
Signature of Debtor 1	iule di Debiol 2
Date Date	

	Case	19-60898-wih	Doc 1	Filed 07/12	-,	itered 07/12/19 1	5:36:29	Desc Main
				Document	Page	43 of 55		
Fill in this	s inform	ation to identify your	case:					
Debtor 1		Toussaint Jerrod	Rowland					
		First Name	Middle	Name	Last Name)		
Debtor 2								
(Spouse if, fil	ling)	First Name	Middle	Name	Last Name)		
		kruptcy Court for the:	NORTHER	N DISTRICT OF	GEORGIA - A	ATLANTA DIVISION		
Case num								Check if this is an amended filing
Officia	al For	m 106Sum						
			and Liab	ilities and (Certain S	Statistical Inforn	nation	12/15
Be as con	nplete ar	nd accurate as possib	le. If two ma	rried people are	filing togeth	er, both are equally res	ponsible for	supplying correct

information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

your original forms, you must fill out a new Summary and check the box at the top of this page. Part 1: Summarize Your Assets Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 18.785.00 1c. Copy line 63, Total of all property on Schedule A/B..... 18,785.00 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 16.974.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 4,500.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 53,215.00 Your total liabilities \$ 74.689.00 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 2,593.00 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 2,593.00 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes

What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Toussaint Jerrod Rowland

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,155.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	4,500.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	21,446.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	25,946.00

Fill in this info	ormation to identify your	case:			
Debtor 1	Toussaint Jerrod	Rowland			
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF GEORGIA - ATLA	ANTA DIVISION	
Case number					
(if known)					☐ Check if this is an
					amended filing
	rm 106Dec ation About a	n Individua	l Debtor's S	Schedules	12/15
If two married	people are filing together	, both are equally resp	onsible for supplying	correct information.	
					atement, concealing property, or
	ey or property by fraud if . 18 U.S.C. §§ 152, 1341, 1		inkruptcy case can res	uit in fines up to \$250,0	000, or imprisonment for up to 20
,	33 ,, -	,			
Si	ign Below				
Did you p	pay or agree to pay some	one who is NOT an att	orney to help you fill o	ut bankruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Ba	nkruptcy Petition Preparer's Notice,
_	· —				on, and Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the su	mmary and schedules	filed with this declarat	tion and
	oussaint Jerrod Rowla	nd	X		
	saint Jerrod Rowland ture of Debtor 1		Signature	e of Debtor 2	
Date	July 12, 2019		Date		

Fill in this information to identify your case:		
Fill in this information to identify your case:	Check one box only as di 122A-1Supp:	rected in this form and in Form
Debtor 1 Toussaint Jerrod Rowland	пши поврем	
Debtor 2 (Spouse, if filing)	■ 1. There is no presu	umption of abuse
United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION	applies will be m	o determine if a presumption of abuse ade under <i>Chapter 7 Means Test</i> cial Form 122A-2).
Case number (if known)		does not apply now because of service but it could apply later.
	☐ Check if this is ar	n amended filing
Official Form 122A - 1		
Chapter 7 Statement of Your Current Monthly	Income	12/15
Be as complete and accurate as possible. If two married people are filing together, both are attach a separate sheet to this form. Include the line number to which the additional informacase number (if known). If you believe that you are exempted from a presumption of abuse qualifying military service, complete and file Statement of Exemption from Presumption of A Part 1: Calculate Your Current Monthly Income	ation applies. On the top of an because you do not have prim	y additional pages, write your name and narily consumer debts or because of
1. What is your marital and filing status? Check one only.		
■ Not married. Fill out Column A, lines 2-11.		
☐ Married and your spouse is filing with you. Fill out both Columns A and B,	lines 2-11.	
\square Married and your spouse is NOT filing with you. You and your spouse a	re:	
☐ Living in the same household and are not legally separated. Fill out bo	th Columns A and B, lines 2	-11.
☐ Living separately or are legally separated. Fill out Column A, lines 2-11; penalty of perjury that you and your spouse are legally separated under no living apart for reasons that do not include evading the Means Test require	onbankruptcy law that applie	es or that you and your spouse are
Fill in the average monthly income that you received from all sources, derived during the 101(10A). For example, if you are filing on September 15, the 6-month period would be March the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do no spouses own the same rental property, put the income from that property in one column only. I	1 through August 31. If the amount include any income amount mo	unt of your monthly income varied during ore than once. For example, if both
	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
Your gross wages, salary, tips, bonuses, overtime, and commissions (before payroll deductions).	\$ 2,346.00	\$
 Alimony and maintenance payments. Do not include payments from a spouse Column B is filled in. 	e if \$	\$
4. All amounts from any source which are regularly paid for household expendence of you or your dependents, including child support. Include regular contributing from an unmarried partner, members of your household, your dependents, parer and roommates. Include regular contributions from a spouse only if Column B is filled in. Do not include payments you listed on line 3.	tions nts,	\$
5. Net income from operating a business, profession, or farm		
Debtor 1		
Gross receipts (before all deductions) Ordinary and necessary operating expenses -\$ 0.00 0.00		
Crainary and necessary operating expenses	ere -> \$ 0.00	\$
	<u>σ.σ.σ.</u>	Ψ
6. Net income from rental and other real property Debtor 1		
Gross receipts (before all deductions) \$ 0.00		
Ordinary and necessary operating expenses -\$ 0.00		
Net monthly income from rental or other real property \$ Copy he		\$
7. Interest, dividends, and royalties	\$	\$

Official Form 122A-1

Debtor 1 Toussaint Jerrod Rowland Page 47 0T 55

Case number (if known)

					olumn A ebtor 1		Column Debtor		
8.	Unemployment compensation			\$		0.00	\$		
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a bene	fit under						-
	For you\$	0	.00						
	For your spouse \$								
	Pension or retirement income. Do not include any am benefit under the Social Security Act.			\$		0.00	\$		
10.	Income from all other sources not listed above. Spec Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hum domestic terrorism. If necessary, list other sources on a total below.	ecurity Act or payment nanity, or internationa	nts I or						
	Part-Time Job			\$		809.00	\$		
				\$		0.00	\$		
	Total amounts from separate pages, if any.		+	\$		0.00	\$		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the tot		\$	3,1	55.00	+ \$		_ = \$_	3,155.00
Part	2: Determine Whether the Means Test Applies to	o You						Total incor	current monthly ne
12.	Calculate your current monthly income for the year.	Follow these steps:							
	12a. Copy your total current monthly income from line 1	1			Сор	y line 11 l	nere=>	\$	3,155.00
	Multiply by 12 (the number of months in a year)							X	12
	12b. The result is your annual income for this part of the	form					•	12b. \$	37,860.00
13.	Calculate the median family income that applies to y	ou. Follow these ste	ps:						
	Fill in the state in which you live.	GA							
	Fill in the number of people in your household.	2							
	Fill in the median family income for your state and size of To find a list of applicable median income amounts, go of for this form. This list may also be available at the bankr	online using the link s	pecified	in t	he separ	ate instruc		13. \$	63,303.00
14.	How do the lines compare?								
	14a. Line 12b is less than or equal to line 13. Or Go to Part 3.	n the top of page 1, cl	neck box	۲1,	There is	no presum	ption of al	buse.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	f page 1, check box 2	2, The pr	esu	mption o	f abuse is	determine	d by Form	122A-2.
Part	3: Sign Below								
	By signing here, I declare under penalty of perjury	that the information o	n this sta	ater	nent and	in any atta	achments i	is true and	correct.
	X /s/ Toussaint Jerrod Rowland								
	Toussaint Jerrod Rowland Signature of Debtor 1								
	Date July 12, 2019 MM / DD / YYYY								
	If you checked line 14a, do NOT fill out or file Form	122A-2.							
	If you checked line 14b, fill out Form 122A-2 and fil	le it with this form.							

United States Bankruptcy Court NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION

re	Toussaint Jerrod Rowland		Case No.	
		Debtor(s)	Chapter	7
	VE	RIFICATION OF CREDITOR	MATRIX	
	, 2.			
abo	ove-named Debtor hereby verific	es that the attached list of creditors is true and	correct to the best	of his/her knowledge.
e abo	ove-named Debtor hereby verific	es that the attached list of creditors is true and o	correct to the best	of his/her knowledge.

Signature of Debtor

Acima Credit 9815 Monroe Street 4th Floor Sandy, UT 84070

Aes/pheaaelt Attn: Bankruptcy Po Box 2461 Harrisburg, PA 17105

Afni, Inc. Attn: Bankruptcy Po Box 3427 Bloomington, IL 61702

Atlanta Spine PC PO Box 14000 Belfast, ME 04915

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Collectron Of Atlanta/Carter-Young Attention: Bankruptcy Po Box 92269 Atlanta, GA 30014

Comcast P.O. Box 530098 Atlanta, GA 30353

Convergent Outsourcing, Inc. Attn: Bankruptcy Po Box 9004 Renton, WA 98057

Credit Collection Services Attn: Bankruptcy 725 Canton St Norwood, MA 02062

Emory University Hosp. Midtown P.O. Box 406939 Atlanta, GA 30384-6939

Familyfirstcu Fka Ftcu 3604 Atlanta Ave Hapeville, GA 30354

First Investors Financial Services Attn: Bankruptcy 380 Interstate North Parkway, Suite 300 Atlanta, GA 30399

Gastroenterology Anesthesia Associates 4754 E. State Rd 64 Bradenton, FL 34208-9058

Georgia Department of Revenue Compliance Division ARCS Bankruptcy 1800 Century BLVD NE Suite 9100 Atlanta, GA 30345-3202

Iq Data International Attn: Bankruptcy Po Box 39 Bothell, WA 98041

IRS
401 W. Peachtree St., NW
Stop #334-D
Room 400
Atlanta, GA 30308

Medcore PO Box 1978 Norcross, GA 30091

Natiowide Recovery Service Attn: Bankruptcy Po Box 8005 Cleveland, TN 37320

Northside Hospital P.O. Box 101757 Atlanta, GA 30392-1757

Panola Edoscopy Center PO Box 537035 Atlanta, GA 30353 Pathology & Laboratory medicine pc 3300 Buckeye Road Suie 178 Atlanta, GA 30341

Phoenix Financial Services. Llc Attn: Bankruptcy Po Box 361450 Indianapolis, IN 46236

Rockdale Family Practice 2020 Honey Creek PKWY Conyers, GA 30013

Rockdale Medical Center PO Box 102291 Atlanta, GA 30369

Sprint 6391 Sprint Pkwy Overland Park, KS 66251

Suntrust Bank Legal Dept/Bankruptcy PO Box 85041 Richmond, VA 23286

Wakefield & Associates Attn: bankruptcy 7005 Middlebrook Pike Knoxville, TN 37909

World Acceptance Corp Attn: Bankruptcy Po Box 6429 Greenville, SC 29606

World Finance 557 Riverstone Pkwy Suite 110 Canton, GA 30114

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	on
\$24	5 filing fee	
\$7	5 administrati	ve fee
+ \$1	5 trustee surc	<u>charge</u>
\$33	5 total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.